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SUGHRUE MION

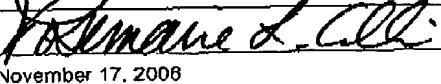
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PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

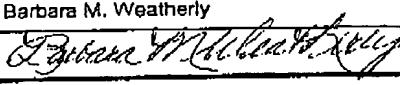
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/583,503	
		Int'l Application Number	PCT/US04/44093	
		Filing Date	June 16, 2006	
		First Named Inventor	ARUMUGHAM, Rasappa G.	
		Art Unit	Not Yet Assigned	
		Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	13	Attorney Docket Number	CA1518	
<b>ENCLOSURES (Check all that apply)</b>				
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page) submitted in duplicate for fee processing  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Third Preliminary Amendment 3 pages  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Supplemental Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawings Sheets	<input type="checkbox"/> After Allowance Communication to Group		
	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter		
	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>		
	<input type="checkbox"/> Request for Refund	<ul style="list-style-type: none"> <li><input type="checkbox"/> Supplemental Application Data Sheet (3 pages)</li> <li><input type="checkbox"/> Copy of Notification of Missing Requirements (2 pages)</li> <li><input type="checkbox"/> Declaration (signed in counter-part) (2 pages)</li> </ul>		
	<input type="checkbox"/> CD, Number of CD(s)			
		Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 19-4880.	
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>				
Firm or Individual	Rosemarie L. Celli Reg. No. 42,397			
Signature				
Date	November 17, 2006			

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence and the documents referred to as attached herein are being transmitted via facsimile to the U.S. Patent and Trademark Office, Mail Stop PCT, Commissioner for Patents, via fax number (571) 273-3201, on the date below.

Typed or printed name	Barbara M. Weatherly		
Signature			
	Date	November 17, 2006	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04)

<b>Effective on 12/09/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>	
<b>Fee Transmittal</b> <b>For FY 2005</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ 130.00)	
<b>Complete If Known</b>	
Application Number	10/583,503
Int'l Application No.:	PCT/US04/44093
Filing Date	June 16, 2006
First Named Inventor	ARUMUGHAM, Rasappa G.
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	CA1518

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 19-4880 Deposit Account Name: Sughrue Mion, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  
 under 37 CFR 1.16 and 1.17

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)
Utility						
Design						
Plant						
Reissue						
Provisional						

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
	=	x	=			
HP = highest number of total claims paid for, if greater than 20						

Indep. Claims Extra Claims Fee (\$)

= x =

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
~ 100 =	/ 50 =	(round up to a whole number) x	=	

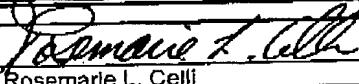
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

2051 Surcharge Fee 37 CFR §1.16(f) re Late Submission of

Other: Executed Declaration

\$ 130.00

SUBMITTED BY		Registration No. 42,397		Telephone 650-625-8100
Signature		(Attorney/Agent)		Date November 17, 2006
Name (Print/Type)	Rosemarie L. Celli			

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